Case 16-20002 Doc 33 Filed 01/29/16 Entered 01/29/16 09:58:16 Desc Main Document Page 1 of 23

Debtor 1	DENNIS MEYER			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
	ankruptcy Court for the: 16-20002	DISTRICT OF WYOMIN		
(if known)				☐ Check if this is an amended filing

For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims Against You and Are Not Insiders

If you are an individual filing for bankruptcy under Chapter 11, you must fill out this form. If you are filing under Chapter 7, Chapter 12, or Chapter 13, do not fill out this form. Do not include claims by anyone who is an insider. Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20 percent or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Also, do not include claims by secured creditors unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

		Unsecured claim
	What is the nature of the claim?	\$ \$21,624.00
BANK OF AMERICA P.O. BOX 15019 WILMINGTON, DE 19850-5019	As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed None of the above apply	
	Does the creditor have a lien on your property?	
	No	
Contact	_	\$
Contact phone	_ Value of security: - Unsecured claim	\$
	What is the nature of the claim? 1974 FORD T VIN NUMBER IN 7696	
BUILTMORE LOAN	As of the date you file, the claim is: Check all that apply	,
7025 N. SCOTTSDALE ROAD, SUITE 105	Contingent	
SCOTTSDALE, AZ 85260	☐ Unliquidated	
•	□ Disputed	
	None of the above apply	
	Does the creditor have a lien on your property?	
	□ No	
Contact	Yes. Total claim (secured and unsecured)	\$ \$37,000.00

B104 (Official Form 104)

For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims

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Debtor	DENNIS MEYER DANZIK	Case nu	Case number (if known) 16-2000			
	Contact phone	_	Value of security: Unsecured claim			i,000.00 000.00
3		What	is the nature of the claim?	CREDIT CA	RD	\$_\$16,486.21
	CHASE BANK-UNITED VISA P.O. BOX 94014 PALATINE, IL 60094-4014	As of □ □ □	the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply	ply		
		Does	the creditor have a lien on you	ur property?		
	Contact Contact phone	- <u>-</u>	Yes. Total claim (secured an Value of security: Unsecured claim	d unsecured)	\$ - \$ 	
4	CITI BANK-DIAMOND		is the nature of the claim?	CREDIT CA		\$ \$3,195.61
	PREFERRED P.O. BOX 6500 SIOUX FALLS, SD 57117	AS of	the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply	Check all that ap	ply	
		_ Does	the creditor have a lien on yo	ur property?		
	Contact Contact phone	- -	No Yes. Total claim (secured an Value of security: Unsecured claim	d unsecured)	\$ - \$ 	
5		What	is the nature of the claim?			\$ \$56.33
	CITI BANK-DIVIDEND P.O. BOX 6500 SIOUX FALLS, SD 57117	As of □ □ □	the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply	Check all that ap	ply	
		_ Does	the creditor have a lien on yo	ur property?		
	Contact	- 🖥	No Yes. Total claim (secured an	d unsecured)	\$	
	Contact phone	_	Value of security: Unsecured claim		- \$ \$	
6		What	is the nature of the claim?	CREDIT CA	RD	\$_\$347.88
	CITI BANK-REWARDS PLUS P.O. BOX 6500 SIOUX FALLS, SD 57117	As of	the date you file, the claim is: Contingent Unliquidated Disputed	Check all that ap	ply	

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Debtor 1	DENNIS MEYER DANZIK		Case nu	mber (if known)	16-20002	1	
			None of the above apply				
		Does the creditor have a lien on your property?					
			No				
	Contact		Yes. Total claim (secured an	d unsecured)	\$		
		_	Value of security:	,	- \$		
	Contact phone		Unsecured claim		\$		
7		What	is the nature of the claim?			\$ \$0.00	
	CWT CANADA II LIMITED					_	
	PARTNERSHIP		the date you file, the claim is:	Check all that ap	ply		
	C/O BRADLEY T. HUNSICKER		Contingent				
	MARKUS WILLIAMS YOUNG &		Unliquidated				
	ZIMMERMAN LLC		Disputed				
	106 E. LINCOLNWAY, SUITE 300 CHEYENNE, WY 82001		None of the above apply				
			the creditor have a lien on you	ur property?			
			No				
	Contact		Yes. Total claim (secured an	d unsecured)	\$		
			Value of security:		- \$		
	Contact phone		Unsecured claim		\$		
8		What	is the nature of the claim?	CREDIT CA	RD	\$ \$40,169.00	
	DINER'S CLUB						
	P.O. BOX 6101		the date you file, the claim is:	Check all that ap	ply		
	CAROL STREAM, IL 60197-6101		Contingent				
			Unliquidated				
			Disputed				
			None of the above apply				
		Does	the creditor have a lien on you	ur property?			
		-	No				
	Contact		Yes. Total claim (secured an	d unsecured)	\$		
			Value of security:		- \$		
	Contact phone		Unsecured claim		\$		
9		What	is the nature of the claim?	CREDIT CA	ARD	\$ \$1,465.21	
	HOME DEPOT CREDIT	A 6	the data was file the claim in	Object of the state of			
	P.O. BOX 790328		the date you file, the claim is: Contingent	Check all that ap	ріу		
	ST. LOUIS, MO 63179		Unliquidated				
			Disputed				
			None of the above apply				
		_	the creditor have a lien on you	ur property?			
			No				
	Contact		Yes. Total claim (secured an	d unsecured)	\$		
			Value of security:		- \$		
	Contact phone		Unsecured claim		\$		
10		What	is the nature of the claim?	INCOME TA	AXES	\$ \$960,532.74	
	INTERNAL REVENUE SERVICE					_	

B 104 (Official Form 104)

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Debtor 1	DENNIS MEYER DANZIK	Case number (if known)	16-20002		
	O. BOX 7346	As of the date you file, the claim is: Check all that a	nat apply		
PH	HILADELPHIA, PA 19101-7346	☐ Contingent ☐ Unliquidated			
		☐ Disputed			
		None of the above apply			
		_			
		Does the creditor have a lien on your property?			
		No Table (
Cont	ntact	Yes. Total claim (secured and unsecured) Value of security:	\$ - \$		
Conf	ntact phone	Unsecured claim	\$		
11		What is the nature of the claim? LEASE TE	RMINATION \$ \$43,725.19		
	SA HEIL	As of the data was file the elements OL I will be			
	O. BOX 35336	As of the date you file, the claim is: Check all that a Contingent	pply		
PH	IOENIX, AZ 85069	☐ Unliquidated			
		☐ Disputed			
		None of the above apply			
		Does the creditor have a lien on your property?			
		No			
Cont	ntact	☐ Yes. Total claim (secured and unsecured)	\$		
		Value of security:	- \$		
Cont	ntact phone	Unsecured claim	\$		
12		What is the nature of the claim? GUARANT	OR \$_\$2,134,000.00		
	GMA OPPORTUNITY FUND 0 3RD AVENUE, 17TH FLOOR	As of the date you file, the claim is: Check all that a	nnly		
	EW YORK, NY 10022	Contingent	PPI		
	-W 101tt, W 10022	☐ Unliquidated			
		☐ Disputed			
		None of the above apply			
		Does the creditor have a lien on your property?			
		No			
Cont	ntact	Yes. Total claim (secured and unsecured) Value of security:	\$ -\$		
Conf	ntact phone	Unsecured claim	\$		
Part 2: Si	ign Below				
	_				
-		nation provided in this form is true and correct.			
	ENNIS MEYER DANZIK	X Signature of Debtor 2			
	IIS MEYER DANZIK ure of Debtor 1	Signature of Deptor 2			
Date	01/29/2016	Date			

	Document	1 ddc 3 01 20					
Fill in this information to identify your case:							
DENNIS MEYER DANZIK							
First Name	Middle Name	Last Name					
First Name	Middle Name	Last Name					
Bankruptcy Court for the:	DISTRICT OF WYOMING	_					
16-20002							
	DENNIS MEYER I First Name First Name Bankruptcy Court for the:	DENNIS MEYER DANZIK First Name Middle Name First Name Middle Name Bankruptcy Court for the: DISTRICT OF WYOMING					

☐ Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

			assets
		Value	of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	1,400,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	4,965,116.35
	1c. Copy line 63, Total of all property on Schedule A/B	\$	6,365,116.35
Par	t 2: Summarize Your Liabilities		
			liabilities unt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	828,367.78
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	960,532.74
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	2,261,069.43
	Your total liabilities	\$	4,049,969.95
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	34,800.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	14,950.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other	schedules.
7.	■ Yes What kind of debt do you have?		

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 1 DENNIS MEYER DANZIK

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	
---	--

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	lotai	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	960,532.74
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	960,532.74

		Bodanie	THE T GGO T OT EG		
Fill in this info	rmation to identify your	case:			
Debtor 1	DENNIS MEYER I	DANZIK			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		DISTRICT OF WYOMIN	G		
Case number	16-20002				
(if known)				_	if this is an led filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
1334 SUNSET BLVD. SOUTH CODY, WY 82414 Park County	\$1,400,000.00		\$650,000.00	Wyo. Const. 19 § 9; Wyo. Star Ann. §§ 1-20-101, -102, -103,
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	-104
2005 BENTLEY ARNAGE 52,000 miles	\$76,300.00		\$5,000.00	Wyo. Stat. Ann. § 1-20-106(a)(iv)
VIN NUMBER ENDING IN 1286 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	0 .00(0)()
HOUSEHOLD GOODS AND FURNISHINGS	\$2,250.00		\$2,250.00	Wyo. Stat. Ann. § 1-20-106(a)(iii)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
1977 LINCOLN CONTINENTAL BATMOBILE-CAR 003	\$250,000.00		\$5,000.00	Wyo. Stat. Ann. § 1-20-106(a)(iv)
VIN NUMBER ENDING IN 0425 Line from Schedule A/B: 8.6			100% of fair market value, up to any applicable statutory limit	
NORMAL USUAL CLOTHING Line from Schedule A/B: 11.1	\$1,500.00		\$1,500.00	Wyo. Stat. Ann. § 1-20-105
Zaro nom conceano / VD.			100% of fair market value, up to any applicable statutory limit	

Case 16-20002 Doc 33 Filed 01/29/16 Entered 01/29/16 09:58:16 Desc Main Document Page 8 of 23 **DENNIS MEYER DANZIK** Case number (if known) 16-20002 Brief description of the property and line on Current value of the Specific laws that allow exemption Amount of the exemption you claim Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **WEDDING RING** Wyo. Stat. Ann. § 1-20-105 \$200.00 \$200.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit PERSONAL PROTECTIVE GEAR, Wyo. Stat. Ann. § 1-20-106(b) \$650.00 \$650.00 FIRE SUITS, ETC. Line from Schedule A/B: 40.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

	Document	Page 9	of 23		
Fill in this information to identify yo	ur case:				
Debtor 1 DENNIS MEYER	P DANZIK				
First Name	Middle Name	Last Name			
Debtor 2					
(Spouse if, filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the	: DISTRICT OF WYOMING				
States Barmaptey Seart for the					
Case number 16-20002					
(if known)				☐ Check	if this is an
				amend	ded filing
000					
Official Form 106D					
Schedule D: Creditors	Who Have Claims	Secure	d by Propert	У	12/15
Be as complete and accurate as possible. I needed, copy the Additional Page, fill it out known).	t, number the entries, and attach it to th				
Do any creditors have claims secured by					
☐ No. Check this box and submit	this form to the court with your other	schedules. Y	ou have nothing else	to report on this form.	
Yes. Fill in all of the information	below.				
Part 1: List All Secured Claims					
2. List all secured claims. If a creditor has r	nore than one secured claim, list the credi	tor separately f	or Column A	Column B	Column C
each claim. If more than one creditor has a passible, list the claims in alphabetical ord	particular claim, list the other creditors in P			Value of collateral that supports this claim	Unsecured portion If any
2.1 ARCADIA CAPITAL	B		\$750,000.00	\$1,400,000.00	\$0.00
ADVISORS, LLC Creditor's Name	Describe the property that secures the		\$750,000.00	\$1,400,000.00	φυ.υυ
Creditor's Name	1334 SUNSET BLVD. SOUTH WY 82414 Park County	CODY,			
100 GREAT NECK ROAD	W1 02414 Faik County				
#5B	As of the date you file, the claim is: C apply.	heck all that			
GREAT NECK, NY 11021	☐ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only	☐ An agreement you made (such as m	ortgage or sec	ured		
☐ Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, med	nanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a	Other (including a right to offset)	FIRST MOR	RTGAGE		
community debt					
Date debt was incurred	Last 4 digits of account numb	er			
2.2 BUILTMORE LOAN	Describe the property that secures the	ne claim:	\$37,000.00	\$34,000.00	\$3,000.00
Creditor's Name	1974 FORD TORINO				
	VIN NUMBER ENDING IN 769) 6			
7025 N. SCOTTSDALE	As of the date you file, the claim is: 0	heck all that			
ROAD, SUITE 105	apply.	nook all that			
SCOTTSDALE, AZ 85260	Contingent				
Number, Street, City, State & Zip Code	Unliquidated				
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
_			ad		
Debtor 1 only	An agreement you made (such as m car loan)	iorigage of sec	uieu		
Debtor 2 only		hamial P N			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Statutory lien (such as tax lien, med	ianic's lien)			
Check if this claim relates to a	Judgment lien from a lawsuit	CAR TITLE	LOAN		
community debt	Other (including a right to offset)	- THEL	0/111		
Date debt was incurred 10/2015	Last 4 digits of account number	er <u>3166</u>			

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Debtor 1 DENNIS MEYER DANZI	IK .	Case number (if know)	16-20002	
First Name Middle N	Name Last Name			
2.3 TD AUTO FINANCE	Describe the property that secures the claim:	\$29,616.00	\$76,300.00	\$0.00
Creditor's Name	2005 BENTLEY ARNAGE 52,000	Ψ23,010.00	φ10,300.00	φυ.υυ
	miles			
B O BOY 0222	VIN NUMBER ENDING IN 1286			
P.O. BOX 9223	As of the date you file, the claim is: Check all that			
FARMINGTON, MI 48333-9223	apply.			
	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
_	_			
Debtor 1 only	An agreement you made (such as mortgage or se car loan)	curea		
Debtor 2 only				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number 0428			
2.4 TD AUTO FINANCE	Describe the property that secures the claim:	\$4,819.00	\$18,500.00	\$0.00
Creditor's Name	2012 GMC ARCADIA 15000 miles			-
	VIN NUMBER ENDING IN 0603			
P.O. BOX 9223	As of the date you file the claim is. Check all that			
FARMINGTON, MI	As of the date you file, the claim is: Check all that apply.			
48333-9223	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or se	cured		
☐ Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred 2012	Last 4 digits of account number 8459			
2.5 TITLE MAX	Describe the property that secures the claim:	\$6,932.78	\$9,000.00	\$0.00
Creditor's Name	2005 JAGUAR VDP 72000 miles			
	VIN NUMBER ENDING IN 4882			
3201 E. THOMAS ROAD	As of the date you file the claim is Observed that			
#104	As of the date you file, the claim is: Check all that apply.			
PHOENIX, AZ 85018	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortgage or se	cured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	·	FIOAN		
community debt	Other (including a right to offset)	LUAN		
Date debt was incurred 12/2015	Last 4 digits of account number 6939			
Add the dollar value of your entries in C	Column A on this page. Write that number here:	\$828,367	778	
If this is the last page of your form, add				
io ino idoi page or your rorin, aud	asiai valao totais iroin an payes.	\$828,367	.10	

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

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Debtor 1	DENNIS MEYER I	DANZIK		Case number (if know)	16-20002
	First Name	Middle Name	Last Name		
Write th	at number here:				
Part 2:	List Others to Be No	tified for a Debt Th	at You Already Listed		
to collect	from you for a debt you	owe to someone else, ou listed in Part 1, list	list the creditor in Part 1, a	and then list the collection agency here.	example, if a collection agency is trying Similarly, if you have more than one as to be notified for any debts in Part 1,
l Na	me Address				
-N	ONE-		On	which line in Part 1 did you er	nter the creditor?
			Las	st 4 digits of account number	

	Case 16-20002 Doc 33		tered 0: 12 of 2	1/29/16 09:58 23	3:16 Desc N	⁄lain
Fill	in this information to identify your case:					
Deb	otor 1 DENNIS MEYER DANZIK					
	First Name Midd	dle Name Last Nam	е			
	otor 2 Susse if, filing) First Name Midd	dle Name Last Nam	e			
Uni	ted States Bankruptcy Court for the: DISTRIC	CT OF WYOMING				
Cas	se number 16-20002					
	nown)				☐ Check	if this is an
					amend	ed filing
∩ff	icial Form 106E/F					
	hedule E/F: Creditors Who Ha	ve Unsecured Claim	e			12/15
	s complete and accurate as possible. Use Part 1 for			creditors with NONP	PIOPITY claims. List	
Sche D: Ci he C	executory contracts or unexpired leases that could redule G: Executory Contracts and Unexpired Leases reditors Who Have Claims Secured by Property. If montinuation Page to this page. If you have no informover (if known).	(Official Form 106G). Do not include space is needed, copy the Part	de any credi you need, f	itors with partially sed fill it out, number the	cured claims that are entries in the boxes of	listed in Schedule on the left. Attach
Par	t 1: List All of Your PRIORITY Unsecured	Claims				
1.	Do any creditors have priority unsecured claims again	ainst you?				
	☐ No. Go to Part 2.					
	Yes.					
2.	List all of your priority unsecured claims. If a credito identify what type of claim it is. If a claim has both priori possible, list the claims in alphabetical order according 1. If more than one creditor holds a particular claim, list	ty and nonpriority amounts, list that c to the creditor's name. If you have m	aim here an	d show both priority an	d nonpriority amounts.	As much as
	(For an explanation of each type of claim, see the instru	uctions for this form in the instruction	booklet.)	Total claim	Priority amount	Nonpriority amount
]			\$960,532.7	umount	amount
2.1	INTERNAL REVENUE SERVICE	Last 4 digits of account number	1786	4	\$282,567.21	\$677,965.53
	Priority Creditor's Name	When we the debt incomed?	2006.20	M E		
	P.O. BOX 7346 PHILADELPHIA, PA 19101-7346	When was the debt incurred?	2006-20	715	-	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check al	I that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	■ Debtor 1 only	☐ Unliquidated				
	☐ Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
	☐ At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	Taxes and certain other debts	ou owe the	government		
	Is the claim subject to offset?	☐ Claims for death or personal in		-		
	■ No	Other. Specify				

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

 \square No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes

☐ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

INCOME TAXES

Total claim

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Debtor 1 **DENNIS MEYER DANZIK** 16-20002 Case number (if know) 4.1 **BANK OF AMERICA** Last 4 digits of account number 8456 \$21,624.00 Nonpriority Creditor's Name P.O. BOX 15019 When was the debt incurred? **WILMINGTON, DE 19850-5019** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only □ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.2 **CHASE BANK-UNITED VISA** 0101 \$16,486.21 Last 4 digits of account number Nonpriority Creditor's Name P.O. BOX 94014 When was the debt incurred? PALATINE, IL 60094-4014 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify CREDIT CARD ☐ Yes 4.3 CITI BANK-DIAMOND PREFERRED Last 4 digits of account number 4468 \$3.195.61 Nonpriority Creditor's Name When was the debt incurred? P.O. BOX 6500 SIOUX FALLS, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify CREDIT CARD ☐ Yes

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Debtor 1 **DENNIS MEYER DANZIK** 16-20002 Case number (if know) 4.4 CITI BANK-DIVIDEND Last 4 digits of account number 7483 \$56.33 Nonpriority Creditor's Name P.O. BOX 6500 When was the debt incurred? SIOUX FALLS, SD 57117 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. □ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only □ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.5 **CITI BANK-REWARDS PLUS** 9998 \$347.88 Last 4 digits of account number Nonpriority Creditor's Name P.O. BOX 6500 When was the debt incurred? SIOUX FALLS, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify CREDIT CARD ☐ Yes **CWT CANADA II LIMITED** \$0.00 4.6 **PARTNERSHIP** Last 4 digits of account number Nonpriority Creditor's Name C/O BRADLEY T. HUNSICKER When was the debt incurred? **MARKUS WILLIAMS YOUNG &** ZIMMERMAN LLC 106 E. LINCOLNWAY, SUITE 300 **CHEYENNE, WY 82001** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

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Document Page 15 of 23 Debtor 1 **DENNIS MEYER DANZIK** 16-20002 Case number (if know) 4.7 **DINER'S CLUB** Last 4 digits of account number 0026 \$40,169.00 Nonpriority Creditor's Name P.O. BOX 6101 When was the debt incurred? **CAROL STREAM, IL 60197-6101** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only □ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify CREDIT CARD ☐ Yes 4.8 **HOME DEPOT CREDIT** 4533 \$1,465.21 Last 4 digits of account number Nonpriority Creditor's Name P.O. BOX 790328 When was the debt incurred? ST. LOUIS, MO 63179 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify CREDIT CARD ☐ Yes 4.9 **LISA HEIL** Last 4 digits of account number \$43.725.19 Nonpriority Creditor's Name P.O. BOX 35336 When was the debt incurred? **PHOENIX, AZ 85069** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent

■ Debtor 1 only Debtor 2 only

Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt Is the claim subject to offset?

■ No ☐ Yes

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify LEASE TERMINATION

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Debtor 1	DENNIS I	MEYER DANZIK		Case n	number (if know)	16-20002	
		PORTUNITY FUND	Last 4 digits of account number			_	\$2,134,000.00
	Nonpriority Cred 800 3RD AV NEW YORK	/ENUE, 17TH FLOOR	When was the debt incurred?				
		City State Zlp Code	As of the date you file, the claim	is: Check	all that apply		
	Who incurred t	the debt? Check one.	☐ Contingent				
	Debtor 1 onl	y	☐ Unliquidated				
	Debtor 2 onl	y	☐ Disputed				
	Debtor 1 and	d Debtor 2 only	Type of NONPRIORITY unsecur	ed claim:			
	☐ At least one	of the debtors and another	☐ Student loans	ou olulli.			
	☐ Check if thi	s claim is for a community debt	☐ Obligations arising out of a ser	paration ag	reement or divorce t	hat you did not	
	Is the claim sul	bject to offset?	report as priority claims			,	
	■ No		Debts to pension or profit-shar	ing plans, a	and other similar deb	ots	
	☐ Yes		■ Other. Specify GUARAN	TOR			
Part 3:	I ist Others	s to Be Notified About a Debt	That You Already Listed				
	_		ut your bankruptcy, for a debt that y	ou already	/ listed in Parts 1 o	r 2. For example, if	a collection agency is
trying t more t	to collect from that one credite	you for a debt you owe to someor	ne else, list the original creditor in P ted in Parts 1 or 2, list the additiona	arts 1 or 2	, then list the colle	ction agency here.	Similarly, if you have
	d Address		n which entry in Part 1 or Part 2 did yo	u list the or	riginal creditor?		
			ne 2.1 of (<i>Check one</i>):	Part 1:	Creditors with Priori	ty Unsecured Claims	S
	ER, CO 8020	M/S 5012DEN		Part 2:	Creditors with Nonpo	riority Unsecured Cl	aims
DENVE	-it, 00 0020		ast 4 digits of account number	17	786		
Name an	d Address	0	n which entry in Part 1 or Part 2 did yo	u list the or	riginal creditor?		
_	D STATES A	_	ne 2.1 of (<i>Check one</i>):	Part 1:	Creditors with Priori	ty Unsecured Claims	S
	:NNSYLVAN INGTON, DO	IIA AVE NW		Part 2:	Creditors with Nonp	riority Unsecured Cl	aims
WASII	ino roit, be		ast 4 digits of account number				
	d Address		n which entry in Part 1 or Part 2 did yo	u list the or	riginal creditor?		
	D STATES A				Creditors with Priori	•	
_	ICT OF WYO OX 668	DIMING		Part 2:	Creditors with Nonp	riority Unsecured Cla	aims
_	ENNE, WY 8	2003					
		La	ast 4 digits of account number				
Part 4:	Add the Ar	mounts for Each Type of Uns	secured Claim				
	he amounts of ecured claim.	certain types of unsecured claims	s. This information is for statistical r	eporting p	ourposes only. 28 U	.S.C. §159. Add the	e amounts for each type
or unse	courca ciaiiii.				Total claim		
	6a.	Domestic support obligations		6a.	\$	0.00	
Total cla		Taxes and certain other debts y	you awa the government	6b.	\$	000 522 74	
11011111	6c.	Claims for death or personal in	-	6c.	\$ 	960,532.74	
	6d.	-	cured claims. Write that amount here.	6d.	\$	0.00	
							\neg
	6e.	Total. Add lines 6a through 6d.		6e.	\$	960,532.74	
					Total Claim		
	6f.	Student loans		6f.	\$	0.00	
Total cla		Obligations arising out of a sen	aration agreement or divorce that y	OU		_	
		did not report as priority claims	•	6g.	\$	0.00	
	6h.		ing plans, and other similar debts	6h.	\$	0.00	
	6i.	Other. Add all other nonpriority ur	nsecured claims. Write that amount he	re. 6i.	\$	2,261,069.43	_
	6j.	Total. Add lines 6f through 6i.		6j.	\$	2.261.069.43	

		Docume	nt rauc 17 01 23	
Fill in this info	ormation to identify your	case:		
Debtor 1	DENNIS MEYER I	DANZIK		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	DISTRICT OF WYOMIN	G	
Case number	16-20002			
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Name Number Street		Person or	company wit	th whom you have the co	ontract or lease	State what the contract or lease is for
Number	2.1					
City State ZIP Code 2.2 Name Number Street City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Number Street City State ZIP Code 2.5 Number Street Number Street Number		Name				_
Number Street S		Number	Street			_
Number Street S		City		State	ZIP Code	_
Number Street	2.2					
City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street		Name				_
Name Street		Number	Street			_
Name Street		City		State	ZIP Code	_
Number Street City State ZIP Code 2.4 Number Street City State ZIP Code City State ZIP Code 2.5 Number Street Number Street State ZIP Code	2.3					
City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street		Name				_
2.4 Name Number Street State ZIP Code State ZIP Code State ZIP Code Number Street Street Number Street Street Number Street Street Street Number Number Number Street Number Number Number Street Number Numbe		Number	Street			_
Number Street City State ZIP Code 2.5 Name Number Street		City		State	ZIP Code	_
Number Street City State ZIP Code 2.5 Name Number Street	2.4	·				
City State ZIP Code 2.5 Name Number Street		Name				_
2.5 Name Number Street		Number	Street			_
Number Street		City		State	ZIP Code	
Number Street	2.5					
		Name				
City State ZIP Code			Street			
		City		State	ZIP Code	

		Document	Page 18 d	of 23	
ill in this	information to identify your	case:			
Debtor 1	DENNIS MEYER I	DANZIK			
	First Name	Middle Name	Last Name		
Debtor 2 Spouse if, filin	rirst Name	Middle Name	Last Name		
•	-	DIOTRIOT OF WAYONING			
Jnited Stat	es Bankruptcy Court for the:	DISTRICT OF WYOMING			
Case numb	per 16-20002				
if known)					☐ Check if this is an
					amended filing
Official	Form 106H				
	ule H: Your Cod	ebtors			12/15
	<u> </u>				12/10
eople are Il it out, ar our name	filing together, both are equent number the entries in the and case number (if known)	boxes on the left. Attach the	ng correct informa e Additional Page	tion. If more space is need to this page. On the top of	eded, copy the Additional Page, of any Additional Pages, write
■ No					
☐ Yes					
		u lived in a community prope , Nevada, New Mexico, Puerto			states and territories include
П №	Go to line 3.				
_		use, or legal equivalent live wit	h you at the time?		
	,	,9	,		
=	□ No				
ı	Yes.				
	In which community stat	e or territory did you live?	Arizona	Fill in the name and	current address of that person.
	ELIZABETH J. DANZ		Alizolia	I ill ill the hame and	current address of that person.
	1334 SUNSET BLVD				
	CODY, WY 82414 Name of your spouse, former spo	ouso, or logal oquivalent			
	Number, Street, City, State & Zip				
in line Form 1	2 again as a codebtor only i	f that person is a guarantor	or cosigner. Make	sure you have listed the	with you. List the person showr creditor on Schedule D (Officia chedule E/F, or Schedule G to
	Column 1: Your codebtor lame, Number, Street, City, State and Zi	ID Codo			tor to whom you owe the debt
N	iamo, numbor, sueet, city, state and Z	ii Ooue		Check all schedules	лат арріу:
3.1				Schedule D, line	
<u> </u>	Name			☐ Schedule E/F, line	·
				☐ Schedule G, line	
	Number Street			<u> </u>	
(City	State	ZIP Code		
				Польть в п	
3.2	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Chedule E/F, line ☐ Schedule E/F, line ☐ Schedule E/F, line ☐ Schedule E/F, line ☐ Schedule D, line	
				☐ Schedule E/F, line	

Street

State

Number

City

ZIP Code

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Fill	in this information to identify your c	·350:				1				
	, ,	YER DANZIK								
	otor 2 use, if filing)									
Uni	ted States Bankruptcy Court for the	e: DISTRICT OF WYOM	1ING							
	se number 16-20002						ck if this is An amende A supplem	ed filing	ng postpetition	ı chapter
\bigcirc	fficial Form 1061					1	13 income	as of the f	ollowing date:	
	fficial Form 106l chedule I: Your Inc					Ī	MM / DD/ \	YYYY		12/15
Be a sup spo	ns complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form.	sible. If two married pec are married and not fili Ir spouse is not filing w	ng jointly, and your ith you, do not inclu	spouse de infor	is li mat	ving wit ion abou	h you, inc ut your sp	lude infor	mation abou nore space is	t your needed,
Par	t 1: Describe Employment									
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-f	iling spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed				□ Empl	•		
	information about additional employers.		☐ Not employed				■ Not e	employed		
	Include part-time, seasonal, or self-employed work.	Occupation	RDX TECHNOLO		<u>RAT</u>	<u>ION</u>				
	Occupation may include student or homemaker, if it applies.	Employer's name Employer's address	3016 19TH NW CALGARY, ALB CANADA	ERTA						
		How long employed t	here? 2009 TC	PRES	EN ⁻	Г	_			
Par	t 2: Give Details About Mor	nthly income								
Esti spou	mate monthly income as of the duse unless you are separated. u or your non-filing spouse have mees space, attach a separate sheet to	late you file this form. If	-						-	
	3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3					For De	btor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	26	300.00	\$	0.00	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	0.00	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	26,3	00.00	\$	0.00	

Deb	tor 1	DENNIS MEYER DANZIK	_	Cas	e number (if known)	16-20002	2
				Fo	or Debtor 1	For Deb	
	Con	y line 4 here	4.	\$	26,300.00	non-filin \$	g spouse 0.00
	•		٦.	Ψ.	20,300.00	Ψ	0.00
5.	List	all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	0.00
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00
	5e.	Insurance	5e.	\$	0.00	\$	0.00
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00
	5g. 5h.	Union dues Other deductions. Specify:	5g.	\$ + \$	0.00	+ \$	0.00
			5h	٠.	0.00	· —	0.00
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	0.00
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	26,300.00	\$	0.00
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	8,500.00	\$	0.00
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	8c. 8d.		0.00 0.00	\$ \$	0.00
	8e.	Social Security	8e.	\$	0.00	\$	0.00
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	e 8f. 8g.	\$	0.00	\$ \$	0.00
	8h.	Other monthly income. Specify:	8h	+ \$	0.00	+ \$	0.00
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	8,500.00	\$	0.00
10.	Calo	culate monthly income. Add line 7 + line 9.	10. \$	3	34,800.00 + \$	0.0	00 = \$ 34,800.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			1,000.00		
11.	Stat Inclu	e all other regular contributions to the expenses that you list in Schedul ade contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are no	ır depei		.,	sted in Sche	dule J. 1. +\$0.00
12.		the amount in the last column of line 10 to the amount in line 11. The ree that amount on the Summary of Schedules and Statistical Summary of Certies				ta, if it	2. \$ 34,800.00
							Combined monthly income
13.	Do y	you expect an increase or decrease within the year after you file this form No.	n?				monuny mcome
		Yes. Explain: LARGE INCREASE IN EARNINGS OVER 2015, W	/HICH	WA	S HISTORICAL	LY LOW	

Fill	in this informa	ation to identify yo	our case:					
Deb	tor 1	DENNIS MEY	ER DAN	ZIK		Chec	ck if this is:	
						_	An amended filing	
	tor 2 ouse, if filing)						A supplement shown 13 expenses as of	wing postpetition chapter the following date:
Unit	ed States Bankr	uptcy Court for the:	DISTRI	CT OF WYOMING		_	MM / DD / YYYY	
Coo	e number 16	6-20002						
	nown))-20002						
Of	fficial Fo	rm 106J						
So	chedule	J: Your	Exper	ises				12/15
info	ormation. If m		eded, atta	. If two married people nch another sheet to th n.				
Par		ibe Your House	hold					
1.	Is this a joir							
	■ No. Go to		in a senar	ate household?				
	□ 103. D00		т и осри	ate nousenoid.				
	= ::	_	st file Offic	ial Form 106J-2, <i>Expens</i>	ses for Separate Hous	sehold of Deb	otor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list D and Debtor 2		Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			DAUGHTER		18	Yes
								□ No □ Yes
								□ No
							_	☐ Yes
								□ No
3.	Do your exp	enses include	_					☐ Yes
O.	expenses of	f people other t	han 👝	No Yes				
	yourself and	d your depende	nts? —	100				
exp	imate your ex enses as of a		our bankr	uptcy filing date unless				apter 13 case to report of the form and fill in the
• •	licable date.							
				government assistance cluded it on <i>Schedule I</i>				
	ficial Form 10						Your exp	enses
4.		or home owners and any rent for th		ses for your residence or lot.	. Include first mortgaç	ge 4. \$	i	6,500.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$;	550.00
		rty, homeowner's	s, or renter	's insurance		4b. \$		180.00
			•	upkeep expenses		4c. \$		250.00
5.		owner's associat		dominium dues our residence, such as l	home equity loans	4d. \$ 5. \$		0.00
٥.	. wantonal I	gago payiin	, o. y		oquity lourio	σ. ψ	•	0.00

6	Utilities: 6a. Electricity, heat, natural gas	_		
6				
6	Ch Motor course gorbone collection	6a.	-	900.00
6	6b. Water, sewer, garbage collection	6b.	\$	100.00
	Sc. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	470.00
-	6d. Other. Specify:	6d.	\$	0.00
ŀ	Food and housekeeping supplies		\$	1,500.00
(Childcare and children's education costs	8.	\$	0.00
(Clothing, laundry, and dry cleaning	9.	\$	150.00
	Personal care products and services	10.	\$	0.00
. 1	Medical and dental expenses	11.	\$	200.00
	Fransportation. Include gas, maintenance, bus or train fare.			
	Do not include car payments.	12.	\$	300.00
3. E	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	200.00
	Charitable contributions and religious donations	14.	\$	0.00
	nsurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
1	5a. Life insurance	15a.	\$	0.00
1	5b. Health insurance	15b.	\$	1,600.00
1	5c. Vehicle insurance	15c.	\$	200.00
1	5d. Other insurance. Specify:	15d.	\$	0.00
	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	_		3166
	Specify:	16.	\$	0.00
	nstallment or lease payments:	_		3166
	7a. Car payments for Vehicle 1	17a.	\$	1,100.00
	7b. Car payments for Vehicle 2	17b.	\$	750.00
	7c Other Specify:	17c.	·	0.00
	7d. Other Specify:	— 17d.	·	0.00
	Your payments of alimony, maintenance, and support that you did not report as		-	
	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	Other payments you make to support others who do not live with you.		\$	0.00
	Specify:	19.	· ———	3.00
	Other real property expenses not included in lines 4 or 5 of this form or on Sched		our Income.	
	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	·	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	·	0.00
	20e. Homeowner's association or condominium dues	20e.	·	0.00
	Other: Specify:	206.	·	
•	outer. Specify.		тф	0.00
. (Calculate your monthly expenses			
2	22a. Add lines 4 through 21.		\$	14,950.00
2	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$, -
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	14,950.00
-	.20. Add into 22d and 22D. The result is your monthly expenses.		Ψ	14,330.00
. (Calculate your monthly net income.			
2	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	34,800.00
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	14,950.00
				.,
2	23c. Subtract your monthly expenses from your monthly income.			40.050.00
	The result is your monthly net income.	23c.	\$	19,850.00
r	Do you expect an increase or decrease in your expenses within the year after you for example, do you expect to finish paying for your car loan within the year or do you expect your monodification to the terms of your mortgage?			se or decrease because of a

REIMBURSED)

	rmation to identify your				
Debtor 1	DENNIS MEYER I	DANZIK Middle Name	Last Name		
Debtor 2	Tistivanie	Wilder Name	Lastivanie		
(Spouse if, filing)	First Name	Middle Name	Last Name	•	
United States B	ankruptcy Court for the:	DISTRICT OF WYOMING			
Case number	16-20002				
(if known)				Check if this is an amended filing	
Official For	<u>m 106Dec</u>				
Declara t	tion About a	n Individual De	ebtor's Schedules	12/15	
obtaining mone		n connection with a bankrup		statement, concealing property, or 50,000, or imprisonment for up to 20	
Sig	ın Below				
Did you pa	ay or agree to pay some	one who is NOT an attorney	to help you fill out bankruptcy form	s?	
■ No					
☐ Yes.	Name of person		. Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).		
•	alty of perjury, I declare re true and correct.	that I have read the summar	y and schedules filed with this decl	aration and	

Signature of Debtor 2

Date

X /s/ DENNIS MEYER DANZIK

DENNIS MEYER DANZIKSignature of Debtor 1

Date 01/29/2016